

CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST COMMITTEE TO ELECT CASIMIR J. "KAZ" KWITOWSKI						
STREET ADDRESS 4015 STANLEY AVE						
CITY ERIE		STATE PA		ZIP CODE 16504-2405		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	
1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT <input checked="" type="checkbox"/>		CITY COUNCIL-ERIE PA				
		DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR 1 1 17 TO 12 31 17		DATE OF ELECTION MO. DAY YEAR FOR OFFICE USE ONLY 2018 JAN 31 PM 2:14		
		CASH BALANCE AT END OF REPORTING PERIOD: \$ 740.65 TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 195.05				
		AMENDMENT REPORT? YES NO <input checked="" type="checkbox"/> TERMINATION REPORT? YES NO <input checked="" type="checkbox"/>				

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.	
SWORN TO AND SUBSCRIBED BEFORE ME THIS 31ST DAY OF JANUARY 20 18 Laurel A. Watson COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL MO. DAY YR. CITY OF ERIE, ERIE COUNTY My Commission Expires Feb 2, 2019	SIGNATURE OF PERSON SUBMITTING REPORT Mary Jean M. Kwitowski PRINTED NAME Mary Jean M. Kwitowski AREA CODE 814 DAYTIME TELEPHONE NUMBER 825-7601

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.	
SWORN TO AND SUBSCRIBED BEFORE ME THIS DAY OF 20 SIGNATURE MY COMMISSION EXPIRES MO. DAY YR.	SIGNATURE OF CANDIDATE Casimir J. Kwitowski PRINTED NAME CASIMIR J. KWITOWSKI AREA CODE 814 DAYTIME TELEPHONE NUMBER 825-7601